#### Case 6:24-bk-17117-SY Doc 10 Filed 01/14/25 Entered 01/14/25 13:50:07 Desc <u>Main Document Page 1 of 21</u>

Fill in this information to identify your case and this filing:						
Debtor 1	Russell	R	Dion			
	First Name	Middle Name	Last Name			
Debtor 2	Victoria	Grace	Dion			
(Spouse, if filing)	First Name	Middle Name	Last Name	_		
United States Bar	nkruptcy Court for the:	Central	District of	California		
Case number	6:24-bk-17117					

V	Check if this is an				
_	amended filing				

# Official Form 106A/B

# Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Descr	ibe Eacl	n Residenc	e, Building, Land, or Other Real Estate	You Own or Have ar	n Interest In
1.	Do you own or have any legal or equitable interest in any residence, building, land, or similar property?						
	☑ No. Go to Part 2.						
	□ Y	es. Where is	the propert	y?			
	1.1	Street addre	ess, if availa	able, or other	What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secur	claims or exemptions. Put red claims on Schedule D: nims Secured by Property.
		description		· 	<ul> <li>☐ Condominium or cooperative</li> <li>☐ Manufactured or mobile home</li> <li>☐ Land</li> <li>☐ Investment property</li> </ul>	Current value of the entire property?	Current value of the portion you own?
		City	State	ZIP Code	☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one.		your ownership interest nancy by the entireties, or
		County			☐ Debtor 1 only		
					<ul><li>□ Debtor 2 only</li><li>□ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>	Check if this is com (see instructions)	munity property
					Other information you wish to add about this ite property identification number:	•	
2.					wn for all of your entries from Part 1, including any umber here		\$0.00
Pa	rt 2:	Descr	ibe Your	· Vehicles			
					nterest in any vehicles, whether they are registered vehicle, also report it on Schedule G: Executory Control		
3.	Ca	rs, vans, truc	ks, tracto	rs, sport utility	y vehicles, motorcycles		
	<b>√</b>	No					
		Yes					

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Debtor Dion, Russell R; Dion, Victoria Grace

	3.1	Make:		Who has an interest in the property? Check one.  ☐ Debtor 1 only		claims or exemptions. Put red claims on <i>Schedule D:</i>
		Model:		Debtor 2 only		nims Secured by Property.
				Debtor 1 and Debtor 2 only		
		Year:		☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage:	:	Check if this is community property (see instructions)		
		Other information:				
				ı		
4.				and other recreational vehicles, other vehicles, and		
	_	•	notors, personal	watercraft, fishing vessels, snowmobiles, motorcycle a	ccessories	
	<b>☑</b> No					
	☐ Ye	es				
	4.1	Make:		Who has an interest in the property? Check one.	Do not deduct secured of	claims or exemptions. Put
				☐ Debtor 1 only	the amount of any secur	red claims on <i>Schedule D:</i>
		Model:		<ul><li>☐ Debtor 2 only</li><li>☐ Debtor 1 and Debtor 2 only</li></ul>	Creditors Who Have Cla	nims Secured by Property.
		Year:		At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Other information:		☐ Check if this is community property (see		
				instructions)		
5.	۷ طط ۴	ho dollar value of the	nortion you o	wn for all of your entries from Part 2, including any	ontrine for name	
5.				umber here		\$0.00
Pa	rt 3:	Describe You	ır Personal a	and Household Items		
Do y	ou owr	n or have any legal o	r equitable inte	rest in any of the following items?		Current value of the
						portion you own?
						Do not deduct secured claims or exemptions.
6.	House	ehold goods and furi	nishinas			1
0.		•	•	ns, china, kitchenware		
	□ No	0				
	_	es. Describe				<b>***</b> *** ***
	_		misc. items	of household goods and furnishings.		\$2,000.00
7.	Electi	ronics				ı
			radios; audio, v	ideo, stereo, and digital equipment; computers, printer	s, scanners; music	
		•		ncluding cell phones, cameras, media players, games	•	
	<b>√</b> No	0				
	☐ Ye	es. Describe				

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Debtor Dion, Russell R; Dion, Victoria Grace

8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No	
	Yes. Describe	
_		
9.	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No	
	Yes. Describe	
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	<b>☑</b> No	
	Yes. Describe	
11.	Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	
	The Voc Passille	
		500.00
12.	•	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	<b>☑</b> No	
	Yes. Describe	
13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	<b>☑</b> No	
	Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	<b>☑</b> No	
	Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,5	00.00
Pa	art 4: Describe Your Financial Assets	

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Debtor Dion, Russell R; Dion, Victoria Grace

Do y	ou own or have any leg	al or equitable interest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.		have in your wallet, in your hom	e, in a safe deposit box, and on hand when y	ou file your petition	
	<b>☑</b> No			. Cash:	
17.			nts; certificates of deposit; shares in credit unultiple accounts with the same institution, list		
	✓ Yes		Institution name:		
	<b>-</b>	17.1 Charling account:	Bank Of America Account Number: XXXXX0434		\$3,260.00
		17.1. Checking account:			ψ0,200.00
18.		or publicly traded stocks	erage firms, money market accounts		
	<b>√</b> No				
	☐ Yes	Institution or issuer name:			
		-			
19.	Non-publicly traded st LLC, partnership, and		ated and unincorporated businesses, inclu	uding an interest in an	
	<b>☑</b> No				
	Yes. Give specific information about				
	them	Name of entity:		% of ownership:	
20.	Government and corp	orate bonds and other negotia	able and non-negotiable instruments		
	•	•	rs' checks, promissory notes, and money ordier to someone by signing or delivering them.		
	<b>☑</b> No				
	Yes. Give specific information about	lancar name.			
	them	Issuer name:			
				_	

Debtor Dion, Russell R; Dion, Victoria Grace

21.	Retirement or pension  Examples: Interests in		1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	<b>√</b> No			
	Yes. List each account separately.	Type of account:	Institution name:	
		401(k) or similar plan:		
		Pension plan:		
		IRA:		
		Retirement account:		
		Keogh:		
		Additional account:		
		Additional account:		
22.		d deposits you have mad s with landlords, prepaid	de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications companies, or stitution name or individual:	
		Electric:		
		Gas:		
		Heating oil:		
		Security deposit on rer	ntal unit:	
		Prepaid rent:		
		Telephone:		
		Water:		
		Rented furniture:		
		Other:		
23.	Annuities (A contract for	or a periodic payment of	money to you, either for life or for a number of years)	
20.	✓ No	or a periodic payment of	money to you, entrer for the or for a number of years)	
	☐ Yes	Issuer name and descr	iption:	
		-		

Debtor Dion, Russell R; Dion, Victoria Grace

24.	Interests in an education IRA, in an acc 26 U.S.C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program, or under a qualified state tuition program. 9(b)(1).	
	<b>☑</b> No		
	☐ Yes Institution name	and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future interests in for your benefit	property (other than anything listed in line 1), and rights or powers exercisable	
	<b>√</b> No		
	Yes. Give specific information about them		
26.	Patents, copyrights, trademarks, trade	secrets, and other intellectual property	
		sites, proceeds from royalties and licensing agreements	
	<b>√</b> No		
	Yes. Give specific information about them		
27.	Licenses, franchises, and other general Examples: Building permits, exclusive licenses, and other general Examples:	al intangibles censes, cooperative association holdings, liquor licenses, professional licenses	
	✓ No		
	Yes. Give specific	1	
	information about them		
Mone	ey or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you		
	<b>√</b> No		
	Yes. Give specific information about		
	them, including whether you already filed the returns and	Federal:	
	the tax years	State:	
		Local:	
29.	Family support		
	Examples: Past due or lump sum alimor settlement	ny, spousal support, child support, maintenance, divorce settlement, property	

Debtor Dion, Russell R; Dion, Victoria Grace

	<b>₫</b> No				
	Yes. Give specific information			Alimony:	
				Maintenance:	
				Support:	
				Divorce settlement:	
				→ Property settlement:	
30.	Other amounts someone owes you				
	Examples: Unpaid wages, disability insur Social Security benefits; unpa	ance payments, disability bene id loans you made to someone		workers' compensation,	
	<b>☑</b> No				
	Yes. Give specific information				
	l				l
31.	Interests in insurance policies  Examples: Health, disability, or life insura	oce: health savings account (HS	SA): credit homeowner's o	r renter's insurance	
	✓ No	ice, ricalar savings account (ric	or y, creat, nomeowner 3, o	Terrer s insurance	
	Yes. Name the insurance company		D		
	of each policy and list its value	Company name:	Beneficiary:		Surrender or refund value:
		-			
32.	Any interest in property that is due you	from someone who has died			
02.	If you are the beneficiary of a living trust, e property because someone has died.			ly entitled to receive	
	<b>☑</b> No				
	Yes. Give specific information				
	l				
33.	Claims against third parties, whether of Examples: Accidents, employment disput	•	•	yment	
	<b>☑</b> No				
	Yes. Describe each claim				
	l				
34.	Other contingent and unliquidated clair claims	ns of every nature, including	counterclaims of the deb	otor and rights to set off	
	<b>⊴</b> No				_
	Yes. Describe each claim				
	<b>l</b>				
35.	Any financial assets you did not alread	y list			
	✓ No  ☐ Yes. Give specific information				1
	100. Give specific information				

Debtor Dion, Russell R; Dion, Victoria Grace

,	\$3,260.00
✓ No. Go to Part 6.  ☐ Yes. Go to line 38.  38. Accounts receivable or commissions you already earned ✓ No	al estate in Part 1.
☐ Yes. Go to line 38.  ()  ()  ()  ()  ()  ()  ()  ()  ()  (	
38. Accounts receivable or commissions you already earned  ✓ No	
38. Accounts receivable or commissions you already earned  ✓ No	
☑ No	Current value of the portion you own? Do not deduct secured claims or exemptions.
Yes. Describe	
39. Office equipment, furnishings, and supplies	
Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
☑ No	
Yes. Describe	
40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
☑ No	
Yes. Describe	
41. Inventory	
☑ No	
Yes. Describe	
42. Interests in partnerships or joint ventures	
☑ No	
Yes. Describe	
Name of entity: % of ownership:	

Debtor Dion, Russell R; Dion, Victoria Grace

43.	Customer lists, mailing lists, or	other compilations	
	<b>₫</b> No		
	Yes. Do your lists include pe	ersonally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	☐ No		
	Yes. Describe		
44.	Any business-related property	you did not already list	
	<b>☑</b> No		
	Yes. Give specific		
	information		
			·
45.	Add the dollar value of all of yo	ur entries from Part 5, including any entries for pages you have attached	40.00
		re→	\$0.00
Pa	ι Θ.	m- and Commercial Fishing-Related Property You Own or Have an	Interest In.
46		an interest in farmland, list it in Part 1.	
46.		r equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.  ☐ Yes. Go to line 47.		
	Tes. Go to line 47.		
			Current value of the portion you own?
			Do not deduct secured claims or exemptions.
4-7			ciains of exemptions.
47.	Farm animals  Examples: Livestock, poultry, far	m-raised fish	
	✓ No	Traised list	
	Yes		
	163		
48.	Crops—either growing or harv	petad	
₩.		Joseph	
	✓ No  ☐ Yes. Give specific		
	information		
	1		

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Debtor Dion, Russell R; Dion, Victoria Grace

49.	Farm and fishing equipment, implements, machin	ery, fixtures,	and tools of trade		
	<b>⊴</b> No				
	Yes				
50.	Farm and fishing supplies, chemicals, and feed				
	<b>⊴</b> No				
	☐ Yes				
51.	Any farm- and commercial fishing-related propert	v vou did not	alroady list		
51.	M No	ly you did not	alleauy list		
	Yes. Give specific				
	information				
52.	Add the dollar value of all of your entries from Pa for Part 6. Write that number here			_	\$0.00
Pa	rt 7: Describe All Property You Own	or Have a	n Interest in Tha	t You Did Not List Above	
53.	Do you have other property of any kind you did no		1?		
	Examples: Season tickets, country club membership	)			
	✓ No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Pa	rt 7. Write tha	t number here	→	\$0.00
Pa	rt 8: List the Totals of Each Part of	this Form			
55.	Part 1: Total real estate, line 2			<b>→</b>	\$0.00
56.	Part 2: Total vehicles, line 5	-	\$0.00		
57.	Part 3: Total personal and household items, line 1	5	\$2,500.00		
58.	Part 4: Total financial assets, line 36		\$3,260.00		
		•			
59.	Part 5: Total business-related property, line 45	-	\$0.00		
60.	Part 6: Total farm- and fishing-related property, lin	ne 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
	p		ψυ.υυ		
62.	Total personal property. Add lines 56 through 61		\$5,760.00	Copy personal property total	+ \$5,760.00
					The second secon

Debtor Dion, Russell R; Dion, Victoria Grace

63.	Total of all property on Schedule A/B. Add line 55 + line 62.	\$5,760.00
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Fill in this inform	ation to identify yo	ur case:		
Debtor 1	Russell	R	Dion	
	First Name	Middle Name	Last Name	
Debtor 2	Victoria	Grace	Dion	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	or the: Centi	District of	California
Case number	6:24-bk-17117			
(if known)				

Check if this is an amended filing

#### Official Form 106C

# Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1:	dentify the Property You	u Claim as Exempt			
1.	✓ You are ☐ You are	of exemptions are you claim claiming state and federal no claiming federal exemptions.	nbankruptcy exemptions. 1 11 U.S.C. § 522(b)(2)	1 U.S.	,	
_	Brief descri	iption of the property and ledule A/B that lists this	Current value of the portion you own  Copy the value from Schedule A/B	Am	ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Brief description: Line from Schedule Av	misc. items of household goods and furnishings.	\$2,000.00	<b>S</b>	\$2,000.00  100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.020
	Brief description: Line from Schedule A	Clothes	\$500.00	<b>1</b>	\$500.00  100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.020
3.	Are you claiming a homestead exemption of more than \$189,050?  (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)  Vi No  Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  No  Yes					

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Victoria Grace Dion First Name Middle Name Last Name

Part 2: Ad	ditional Page				
•	ion of the property and fule A/B that lists this	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
Brief description:	Bank Of America Checking account Acct. No.: XXXXX0434	\$3,260.00	√ı	\$3,260.00	15 U.S.C. § 1673
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	

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Name I	R Middle Name	<b>Dion</b> Last Name	
Name	Middle Name	Last Name	
toria	Grace	Dion	
Name I	Middle Name	Last Name	
ptcy Court for the:	Central	District of	California
-bk-17117			
	Name uptcy Court for the:	Name Middle Name uptcy Court for the: Central	Name Middle Name Last Name  uptcy Court for the: Central District of

Check if this is an amended filing

#### Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B:* Property (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property.* If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

per (if known).				
art 1: List All of Your PRIORITY Ur	nsecured Claims			
Do any creditors have priority unsecured □ No. Go to Part 2. ☑ Yes.	claims against you?			
claim listed, identify what type of claim it is. If amounts. As much as possible, list the claims	a claim has both priority and nonpriority amounts, list that claim I in alphabetical order according to the creditor's name. If you have	nere and show re more than tw	both priority and	I nonpriority
(For an explanation of each type of claim, see	e the instructions for this form in the instruction booklet.)			
		Total claim	Priority amount	Nonpriority amount
Internal Revenue Service	Last 4 digits of account number	\$30,000.00	\$30,000.00	\$0.00
Priority Creditor's Name P O BOX 7346 Number Street	When was the debt incurred?  As of the date you file, the claim is: Check all that apply			
Philadelphia, PA 19101-7317 City State ZIP Code	☐ Contingent ☐ Unliquidated			
Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  ✓ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  Yes	Type of PRIORITY unsecured claim:  ☐ Domestic support obligations  ☑ Taxes and certain other debts you owe the government	ed		
	Do any creditors have priority unsecured of No. Go to Part 2.  ✓ Yes.  List all of your priority unsecured claims. claim listed, identify what type of claim it is. If amounts. As much as possible, list the claims fill out the Continuation Page of Part 1. If more (For an explanation of each type of claim, see Priority Creditor's Name  POBOX 7346  Number Street  Philadelphia, PA 19101-7317  City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  ✓ Check if this claim is for a community debt  Is the claim subject to offset?	Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditor (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Internal Revenue Service  Priority Creditor's Name P O BOX 7346  Number Street  As of the date you file, the claim is: Check all that apply.  Philadelphia, PA 19101-7317  City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt  Is the claim subject to offset?  No	Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separate claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than twe fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim  Internal Revenue Service  Last 4 digits of account number  P O BOX 7346  Number Street  As of the date you file, the claim is: Check all that apply.  Philadelphia, PA 19101-7317  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No	Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each clair claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, as much as possible, list the claim is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and amounts. As much as possible, list the claim is nahabetical order according to the creditor's name. If you have more than two priority unsecured fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Internal Revenue Service  Last 4 digits of account number  When was the debt incurred?  Unliquidated Unl

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3. Do any creditors have nonpriority unsecured claims against you?

☑ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

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Case number (if known) 6:24-bk-17117 Russell Debtor 2 Victoria Dion Grace First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

Debtor 1

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

					Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.		\$30,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6e.		\$30,000.00
					Total claim
Total claims from Part 2	6f.	Student loans	6f.		\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00
	6g. 6h.		6g. 6h.		
		divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	J	+	\$0.00
	6h.	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Add all other nonpriority unsecured claims.	6h.	+	\$0.00 \$0.00

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Internal Revenue Service P O BOX 7346 Philadelphia, PA 19101-7317

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FOR COURT USE ONLY
NKRUPTCY COURT
ALIFORNIA - RIVERSIDE DIVISION
CASE NO.: 6:24-bk-17117 CHAPTER: 7
SUMMARY OF AMENDED SCHEDULES, MASTER MAILING LIST, AND/OR STATEMENTS [LBR 1007-1(c)]
ee Schedule on the Court's website www.cacb.uscourts.gov). A nal) is required as an attachment if creditors are being added to the
apply) are being amended:
apply) are being amended:  Schedule E/F  Schedule G
Schedule E/F Schedule G
Schedule E/F Schedule G  Schedule J-2 Statement of Financial Affairs
Schedule E/F Schedule G  Schedule J-2 Statement of Financial Affairs  ent of Intention Master Mailing List
Schedule E/F Schedule G  Schedule J-2 Statement of Financial Affairs ent of Intention Master Mailing List  that the amended schedules, master mailing list, and or statements are
Schedule E/F Schedule G Schedule J-2 Statement of Financial Affairs ent of Intention Master Mailing List that the amended schedules, master mailing list, and or statements are  /s/ Russell R Dion

Doc 10 Filed 01/14/25 Entered 01/14/25 13:50:07 Case 6:24-bk-17117-SY Main Document Page 19 of 21 NOTE: It is the responsibility of the Debtor, or the Debtor's attorney, to serve copies of all amendments on all creditors listed in this Summary of Amended Schedules, Master Mailing List, and/or Statements, and to complete and file the attached Proof of Service of Document.

#### PROOF OF SERVICE OF DOCUMENT

I am over the age of 18 and not a party to this bankruptcy case or adversary proceeding. My business address is:

A true and correct copy of the foregoing document entitled (specify): SUMMARY OF AMENDED SCHEDULES, MASTER MAILING LIST, AND/OR STATEMENTS [LBR 1007-1(c)] will be served or was served (a) on the judge in chambers in the form and manner required by LBR 5005-2(d); and (b) in the manner stated below: 1. TO BE SERVED BY THE COURT VIA NOTICE OF ELECTRONIC FILING (NEF): Pursuant to controlling General Orders and LBR, the foregoing document will be served by the court via NEF and hyperlink to the document. On (*date*) the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following persons are on the Electronic Mail Notice List to receive NEF transmission at the email addresses stated below: Service information continued on attached page 2. SERVED BY UNITED STATES MAIL: On (date) , I served the following persons and/or entities at the last known addresses in this bankruptcy case or adversary proceeding by placing a true and correct copy thereof in a sealed envelope in the United States mail, first class, postage prepaid, and addressed as follows. Listing the judge here constitutes a declaration that mailing to the judge will be completed no later than 24 hours after the document is filed. Service information continued on attached page 3. SERVED BY PERSONAL DELIVERY, OVERNIGHT MAIL, FACSIMILE TRANSMISSION OR EMAIL (state method for each person or entity served): Pursuant to F.R.Civ.P. 5 and/or controlling LBR, on (date) , I served the following persons and/or entities by personal delivery, overnight mail service, or (for those who consented in writing to such service method), by facsimile transmission and/or email as follows. Listing the judge here constitutes a declaration that personal delivery on, or overnight mail to, the judge will be completed no later than 24 hours after the document is filed. Service information continued on attached page I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct. **Bosky Kathuria** 01/14/2025 /s/ Bosky Kathuria Printed Name Date Signature

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Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
Bosky Kathuria	
Bar Number: 295510	
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Phone: (760) 409-3647 Fax: (760) 565-5253	
Email: bosky@boskykathuria.com	
Debtor(s) appearing without attorney	
✓ Attorney for Debtor(s)	
UNITED STATES BA	NKRUPTCY COURT
CENTRAL DISTRICT OF CA	ALIFORNIA - RIVERSIDE DIVISION
In re:	CASE NO.: 6:24-bk-17117
Russell R Dion	CHAPTER: 7
Victoria Grace Dion	
	VERIFICATION OF MASTER
	MAILING LIST OF CREDITORS
	[LBR 1007-1(a)]
	[==:::(#)]
Dilitaria	
Debtor(s).	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applications filed in this bankruptcy case, consisting of 1 sheet(s) is	
assume all responsibility for errors and omissions.	complete, correct, and consistent with the Debtor's schedules and five
additional responsibility for entere and enterested.	
Date: 01/14/2025	/s/ Russell R Dion
Signa	ature of Debtor 1
Date: 01/14/2025	/s/ POA For Victoria Grace Dion
Signa	ature of Debtor 2 (joint debtor) (if applicable)
Date: 01/14/2025	
	/s/ Bosky Kathuria ature of Attorney for Debtor (if applicable)